

Name of Offering (check if this is an amendment and name has changed, and indicate change.)

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LED STATES **EXCHANGE COMMISSION** Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB Number	3235-0076
Expires:	December 31, 1996

OMB APPROVAL

Estimated average burden hours per response......16.00

SEC USE ONLY							
Prefix		Serial					
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1							

Dickstein & Co., L.P.		1/325
Filing Under (Check box(es) that apply): Type of Filing: New Filing Ame		ction 4(6) ULOE
	A. BASIC IDENTIFICATION DAT	PROCESSED
1. Enter the information requested about the	issuer	2
Name of Issuer (☐ check if this is an amenda Dickstein & Co., L.P.	ment and name has changed, and indicate change.)	AUG 2 2 2005 THOMSOM
Address of Executive Offices 660 Madison Avenue, 16 th Floor, New York,	(Number and Street, City, State, Zip Co, NY 10021	CIRLARIO
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Co	ode) Telephone Number (Including Area Code)
		d to, risk aarbitrage transactions in connection with talizations, liquidations or other similar transactions.
•	nited partnership, already formed	lease specify): BEST AVAILABLE COPY
	Month Year	
Actual or Estimated Date of Incorporation or	r Organization: 0 1 8 6	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization	n: (Enter two-letter U.S. Postal Service abbr CN for Canada; FN for other foreign juris	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Enter promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner *☑ Executive Officer ☐ Director ☐ General and/or *of the General Partner of the General Partner Managing Partner
Full Name (Last name first, if individual) Dickstein, Mark
Business or Residence Address (Number and Street, City State, Zip Code) 660 Madison Avenue, 16 th Floor, New York, NY 10021
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or *of the General Partner of the General Partner Managing Partner
Full Name (Last name first, if individual) Farr, Edward
Business or Residence Address (Number and Street, City, State, Zip Code) 660 Madison Avenue, 16 th Floor, New York, NY 10021
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director. ☐ General and/or*of the General Partner of the General Partner.
Full Name (Last name first, if individual) Connell, Michael
Business or Residence Address (Number and Street) City, State, Zip Code) 660 Madison Avenue, 16 th Floor, New York, NY 10021
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or *of the General Partner of the General Partner
Full Name (Last name first, if individual) Nguyen, Dang
Business or Residence Address (Number and Street, City, State, Zip Code) 660 Madison Avenue, 16 th Floor, New York, NY 10021
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or ☐ for the General Partner ☐ Managing Partner
Full Name (Last name first, if individual) Jablonsky, Todd
Business or Residence Address: (Number and Street, City, State, Zip Code) 660 Madison Avenue, 16th Floor, New York, NY 10021
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or *of the General Partner of the General Partner Managing Partner
Full Name (Last name first, if individual) Waxman, Leigh
Business or Residence Address (Number and Street, City, State, Zip Code) 660 Madison Avenue, 16 th Floor, New York, NY 10021
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director *☑ General and/or Managing Partner
Full Name (Last name first, if individual) Dickstein Partners, L.P.
Business or Residence Address (Number and Street, City, State, Zip Code) 660 Madison Avenue, 16th Floor, New York, NY 10021

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner *of the General Partne	☐ Executive Officer r	☐ Director	*☑ General and/or Managing Partner
Full Name (Last name first, if Dickstein Partners, Inc.	individual)				
Business or Residence Addre 660 Madison Avenue, 16th F			Code)		
	(Use blank she	eet, or copy and use add	itional copies of this she	et, as necessar	y)

· A					B.	INFORM	ATION AL	OUT OF	FERING :	The state	મુશ્કે પૂર્		
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		iness the	General	artifer in its	3010 41301	etion accep	ts subscrip	tions for a	icsser anno	uiit.			Yes No
3	Does	the offeri	ng permit i	joint owner	shin of a s	ingle unit?							
					•	•							on or similar
••	remun	eration for	or solicitati	ion of purch	nasers in co	onnection v	vith sales o	f securities	in the offe	ring. If a p	person to be	e listed is	an associated
													aler. If more
	than fi		rsons to be	listed are a	associated	persons of	such a brol	ker or deale	er you may	set forth th	ie informat	ion for tha	t broker or
Fu	- 		me first it	f individual	/								
		Securitie		marriada	,								
Bu	siness	or Reside	nce Addre	ss (Number	and Stree	t, City, Stat	e, Zip Cod	e)					
				York, NY		, ,,	, ,	,					
Na	me of a	Associate	d Broker o	r Dealer									
				d Has Solic individual									. ☑ All State
(C		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	ID]
[II]	-	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
_	[T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	II Nam Ii Capit		ime first, if	f individual)								
			nce Addre w York, N	ss (Numbei VY 10019	and Stree	t, City, Sta	te, Zip Cod	le)					
Na	me of	Associate	d Broker c	r Dealer			, , , , , , , , , , , , , , , , , , , ,						
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				d Has Solic									. All State
(C [A		An States	[AZ]	individual [AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	□ All State [ID]
[]]	-	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
-	[T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Fu	ill Nam	e (Last na	ame first, i	f individual)								
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Di	12111622	or Reside	nice Addre	ss (Number	and Succ	i, City, Sta	ie, Zip Cou	10)					
Na	ame of	Associate	d Broker o	or Dealer	· · · · · · · · · · · · · · · · · · ·								
<u>C.</u>	ato 2 !	Which D	moon T late	d Has Solic	itad an Tari	anda ta Call	ait Demake	2040					
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	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[1]	[_]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M	(T)	[NE] [SC]	[NV]	[NH] ITNI	[NJ] ITXI	[NM] IUTI	[NY] [VT]	[NC]	[ND] [WA]	[OH]	[OK] [WI]	[OR] [WY]	[PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

. [C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND I	SE OF PROCEED	S
`1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$
	Other (Limited Partnership Interests)	\$300,000,000.00*	\$48,502,149.00
	Total	\$300,000,000.00	\$48,502,149.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0: if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	-66-	\$48,502,149.00
	Non-accredited Investors		\$ 48,302,143.00
	Total (for filings under Rule 504 only)		\$ \$
	Answer also in Appendix, Column 4, if filing under ULOE.		Ψ
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities		
	sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	☑	\$25,000.00
	Legal Fees	✓	\$ 500,000.00
	Accounting Fees	▶ ☑	\$225,000.00
	Engineering Fees	▶□	\$
	Sales Commissions (specify finders' fees separately)	▶□	\$
	Other Expenses (identify) Filing Fees and Miscellaneous	✓	\$ 250,000.00
	Total	✓	\$1,000,000.00

^{*} Estimated solely for purpose of this filing. Actual amount may be greater or less than the estimated amount.

	b. Enter the difference between the aggregate offering pand total expenses furnished in response to Part C - Questi proceeds to the issuer."	ion 4.a. This difference i	s the	"adjusted gross	\$ <u></u>	299,000,000.0
5.	Indicate below the amount of the adjusted gross proceeds each of the purposes shown. If the amount for any purpos the box to the left of the estimate. The total of the payment to the issuer set forth in response to Part C - Question 4.b at					
				Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees			\$	_ 🗆	\$
	Purchase of real estate			\$	_ 🗆	\$
	Purchase, rental or leasing and installation of machinery and	d equipment		\$		\$
	Construction or leasing of plant buildings and facilities			\$		\$
	Acquisition of other businesses (including the value of secu offering that may be used in exchange for the assets or secu pursuant to a merger)	rities of another issuer		\$		\$
	Repayment of indebtedness			\$		\$
	Working capital (Available for Investment)					\$
	Other (specify): As described in the Offering Memorandum			\$	_	\$299,000,000.00
				\$	_	\$
	Column Totals			\$	_	\$299,000,000.00
	Total Payments Listed (column totals added)			☑ \$ <u>299</u>		
e#.	Q-FE	DERAL SIGNATURE				
ollov of its	ssuer has duly caused this notice to be signed by the undering signature constitutes an undertaking by the issuer to fataff, the information furnished by the issuer to any non-a	furnish to the U.S. Secur	ities	and Exchange Co	mmission	, upon written requ
Issu	er (Print or Type)	Signature			Date	
Dial	stein & Co., L.P.	Warnan			81	9/05
	a of Cianar (Print or Tyma)	Title of Signer (Print or Type)				
	e of Signer (Print or Type)					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions	Yes	No
	of such rule?		abla

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date			
Dickstein & Co., L.P.	Legy Warren	819105			
Name (Print or Type)	Title (Print or Type)				
Leign Waxman	Vice President of Dickstein Partners, Inc., General Partner of Dickstein Partners, L.P., General Partner of the Issuer				

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

NATE OF								adequity of the second			
1	2		3		4				5		
	Intend to non-ac investors (Part B-	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
AL		ļ									
AK											
AZ		ļ									
AR											
CA		X	300,000,000.00	2	1,773,535.00			_	X		
CT	<u> </u>	X	300,000,000.00	3	1,086,783.00			 	X		
DE		X	300,000,000.00	1	2,520,414.00				X		
DC			330,000,000,00		2,020,111.00				1		
FL	<u>-</u>	X	300,000,000.00	4	2,224,231.00				X		
GA											
HI							***************************************				
ID				,							
IL		X	300,000,000.00	1	191,549.00				X		
IN											
IA KS	ļ	ļ									
KY		 									
LA		-					 				
ME											
MD		 									
MA		X	300,000,000.00	1	195,359.00	· · · · · · · · · · · · · · · · · · ·			X		
MI											
MN											
MS											
MO											
MT	ļ <u>.</u>								<u> </u>		
NE NV		-							 		
NH		-									
NJ	}	X	300,000,000.00	10	3,552,357.00			+	X		
NM	<u> </u>								 		
NY		X	300,000,000.00	42	33,835,633.00				X		
NC											
ND											
OH			200.000.000								
OK	1	X	300,000,000.00	1	2,500,000.00			-	X		
OR									<u> </u>		
PA	1										

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1	2		3 4			4					
	Intend to non-accinvestors (Part B-I	credited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Disqua under St (if ye Type of investor and explai amount purchased in State waiver (Part C-Item 2)			amount purchased in State				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
RI		X	300,000,000.00	1	622,288.00				X		
SC											
SD											
TN											
TX											
UT											
VT											
VA											
WA											
WV											
WI											
WY											
PR											